

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000000955

**Entity Name:** VITAS OF NORTH FLORIDA, INC.

**Current Principal Place of Business:**

100 S. BSICAYNE BLVD., STE. 1500  
ATTN: LEGAL DEPT.  
MIAMI, FL 33131

**FILED**  
**Mar 19, 2014**  
**Secretary of State**  
**CC5109422844**

**Current Mailing Address:**

255 E 5TH ST, STE 2600  
BARBARA S GUGEL  
CINCINNATI, OH 45202

**FEI Number: 65-1094331**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name MCMANARA, KEVIN J  
Address 255 E 5TH STREET, STE 2600  
City-State-Zip: CINCINNATI OH 45202

Title CEO  
Name O'TOOLE, TIMOTHY S  
Address 100 SOUTH BISCAYNE BLVD., STE. 1500  
City-State-Zip: MIAMI FL 33131

Title VP  
Name WILLIAMS, DAVID P  
Address 255 EAST 5TH ST., SUITE 2600  
City-State-Zip: CINCINNATI OH 45202

Title P  
Name DAVID, WESTER  
Address 100 S BISCAYNE BLVD  
City-State-Zip: MIAMI FL 33131

Title SGC  
Name DALLOB, NAOMI C  
Address 255 E 5TH ST, STE 2600  
City-State-Zip: CINCINNATI OH 45202

Title AT  
Name STEPHENS, MARK W  
Address 255 E 5TH ST, SUITE 2600  
City-State-Zip: CINCINNATI OH 45202

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MARK W. STEPHENS**

**ASSISTANT TREASURER 03/19/2014**

Electronic Signature of Signing Officer/Director Detail

Date